EXHIBIT G

EXHIBIT G

Renown

Renown Urgent Care Ryland

975 Ryland Suite 101 - Reno, NV 89502-1669 Phone: 775-982-5000 - Fax: 775-982-5220

Occupational Health Network Progress Report and Disability Certification

Date of Setvice: 7/27/2016	No Show			Next Visit: 08/04/2016 (@ 3:00 PM
	the second secon	Claim Informa		PARTY IS IN TIRE AND AND TO THE PARTY OF THE
Pafient Name: Lucero Sanche		Claim Number:		
Employer: RENOWN			in charte	
		Date of Injury:	7/20/2018	
nsurer/TPA: WORKERS		ID/SSN:	A CONTRACTOR OF THE PARTY OF TH	
Eccupation: Cashier		injury, initial e	ncounter, Left knee i	or drug screening, Right knee njury, initial encounter, Fall, initial ial spedunter, and Strain of Jeft
			counter were pertine	
		vledical inform		
Related to Industrial Injury?				111 C 201 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
flooring. Has not taken any le elevation of legs. State s worked 8 hr shift today wi carry heavy boxes which inc	NSAID for pain. Only ab th 8/10 pain. C/e increase reases knee pain. Denies	le to take Tylen d pain with am numbness/tingl	ol due to gastric sleen bulation, climbing st ing.	gister. Fell on both knees on hard ve. No ice application to knees, no airs and bending knees. State has to
knee. Pain with straight leg- cadiates pain	raise without decreased F	₹ÖNi, Left knæ	swelling and TTP to	t, laceration of bruising seen at right left lateral aspect of knee joint that
discomfört. Fåyors L/R leg på in L/R.	ially with straight leg rai with ambulation. Sin sen	se, decreased R sation intact. S	OM with flexion and kin p/w/d. Equal stre	extension of right knee dye to ngth with psuhing of ffot but invokes
Pre-Existing Condition(s):				
Assessment Initial Visit			~	
Status: Additional Care Req	uired	Permanent Dis	ability:No	•
Plan: Medication		<u> </u>		
Comments: Tylenol as need	ed for pain, may use Volt	aren eream as o	lirected for pain	
Diagnostics: K-ray				
Comments: both knee xrays		•		A control of the cont
Comments: No fractures se				20120
		Disability Infor		
Status: Released to Restrict		Transfer (WINIO)	MIZCONS SECTION OF THE PROPERTY OF THE PROPERT	(1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
From: 7/27/2016	en Dury	In		
	•	ixestrictions at	e: Temporary	
Through: 8/3/2016	ortografiko (M. Stelling al-regia - magant	Angrees and a supplied to the	Parameter (Company)	
Manager of the State of the Sta		Physical Restr		
Sitting:	Standing:		Stooping:	Bending:
	Comments may take fr		0 hrs/day	0 brs/day
San William	every 2 hrs to si		ON 11	
Squatting:	Walking:	l	Climbing:	Pushing:
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Pulling	Other	4	ting Above Shoulder	Reaching Above Shoulder (R):
		(L):	ning Below-Shoulder	manufacture of the col
1			ing pelon-Phonider	Reaching Below-Shoulder (R):
1		(L);		
		green was a particular		
		ot to exceed We		
	it Limit(lb): < or = to 10 p		ting(hrs): 0 Wei	ght Limit(lb): < or = to 10 pounds
Comments: Way use Tylen	ol as needed for pain, Ma	ıy use ice applic	ation for swelling as	needed, May take frequent breaks
every 2 hrs to ice/elevate b	orn legs, way use OTC b	opical analgesic	as needed for pain,	May use prescribed anti-inflammator
get as prescribed for pain.	Recheck in 1 week		Martin care of a character of the care of a sufficient	Conff. (cl. 47.) and an experience of the conff.
		Renefitive A	ctions	
Hands: i.e. Fine Manipulati				colorida - no contrata de la contrata de la companya de la colorida del la colorida de la colorida de la colorida del la colorida de la colorida del la colorida de la colorida de la colorida del la col

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 3 of 39

	Operate Machinery:				
,	Name: Marisa Rodriguez	Physician Signanue: e-SignRODRIGUEZ, MARISA F.N.P.	e-Signature: Dr	. Tibor Toplenszky, Med	ical Director
Location:	Renown Urgent Care Rylai 975 Ryland Suite 101 Reno, NV 89502-1669	id	to be a second to the second t	Clinic Phone Number:	Dept: 775-982-5000
Appointm	rent Time: 4:00 Pm	Visit Start Til			
Check-In	Time: 4:10 Pin Original-Treating Phy	Visit Dischar siciah or Chiroptactor Page		5:20 PM Page 3-Employer Page 4-Er	nployee

Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1568 Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

Date of Service: 8/4/2016	No.	Show: No		late / Time of h	lext Visit: 8/11/2	016 @ 11:30AM
经发展的基础的		Elaim l	information a			
Parient Name: Lucero Sanche:	ž .	Claim I				
Employer: RENOWN		Date of	Injury: 7/26/201	.6		
insurer / TPA: Workers Choice	:2	ID (SS)				· · · · · · · · · · · · · · · · · · ·
Occupation: Cashier		Diagnos	sis: Diagnoses o	f Strain of left obscuent enco	knee, subsequen unter were nerti	t encounter and inent to this visit.
			informations			
Related to Industrial Injury? Y	ės.			And the continue of the same	The second and second second	to any transfers, to set to be trained as the Paris
Subjective Complaints: DOI 7	/26/16. Tripped and	I fell over co	rds while closin	g the cash regi	ster. Fell on hot	knees on hard
flooring. She reports today ti pain posterolateral, She state work from fam - 16am and t She never received the script Objective Findings: Left Kner	is that at work she i her job has no one to lor the diclofenac s in No gross deformi	s unable to fo o cover for h cel. Has take ty. TTP post	ollow restriction or and so she do n Tylenol with erolaterality, di	as due to requir ses a lot of wall little relief.	rements of job. S ting, standing a	the has no help at ad getting orders.
drawer test negative. McMu				•	*	
Right Knee: Some anterolate	eral swelling of knee	. Till anteri	lorly, diffuse.		y	
Full ROM with pain in flexi	on. Anurost drawe	r test negativ	e. wcwiurtay's	meaneturive.	Unable to squat	due to pain.
Pre-Existing Condition(s):						
Assessment: Condition Sam						
Status: Additional Care Requ	uired 	Permat	nent Disability:	lo 		
Plan: Medication						
Diagnostics:						
Comments: X-Rays were ner	eative for any acute	abnormaliti	es. Reordered	liciofenac gel. (Jave patient kno	e braces for hoth
knees.	 .					
		Disabili	ty Information			TO A CANCELLAR
Status: Released to Restricte					"Be " Section to Aven Branch in the control of	dispend http://est.com/dispendings/
From: 8/4/2016	4.574,	De01-	ctions are: Tem	nóra Pv		
Through: 8/13/2016		7/6:3(1)	ogona ato. semi	ioi ar h		
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TANGETT DE LIFECTO		e design	T. D. S. A. L. T. H. S. R.			spole and large back and
	O to a		al Restrictions	Change Control		
Sitting:	Stand	ding:	al Restrictions	Stooping:		Bending:
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Sitting: Squatting:	<pre> < or = to</pre>	ding: 2 hrs/day ding; 2 hrs/day	Climbi Reaching Abo (L): Reaching Bel	ng: ive Shoulder	Reaching Abov	shing.
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Sitting: Squatting: Pulling: Carrying(hrs): Weight Comments: Seated work 75 needed, Allow breaks every	<pre></pre>	ding: 2 hrs/day cing: 2 hrs/day er: er: essquatting, l legs elevated	Climbi Reaching Abo (L): Reaching Bel (L): ecd Weight Lin Lifting(hrs) Please allow wo	eve Shoulder ow Shoulder uts Weigl rker to sit/stan	Reaching Abov Reaching Below At Limit(lb): < or d to comfort. Pr	shing: e Shoulder (R): v Shoulder (R): := to 10 pounds
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Sitting: Squatting: Pulling: Carrying(hrs): Weight Comments: Seated work 75 needed. Allow breaks every Hands: i.e. Fine Manipulatio Feetalies Operating Foot Con	<pre></pre>	ding: 2 hrs/day cing: 2 hrs/day er: er: essquatting, l legs elevated	Climbi Reaching Abo (L): Reaching Bel (L): ecd Weight Lin Lifting(hrs) Please allow wo	eve Shoulder ow Shoulder uts Weigl rker to sit/stan	Reaching Abov Reaching Below At Limit(lb): < or d to comfort. Pr	shing: e Shoulder (R): v Shoulder (R): = to 10 pounds evide chair if
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Sitting: Squatting: Pulling: Carrying(hrs): Weight Comments: Seated work 75 needed. Allow breaks every Hands: i.e. Fine Manipulatio Feetaics: Operating Foot Son Driving / Operate Machinery Physician Name: Alan N Ta	<pre></pre>	ding: 2 hrs/day cing; 2 hrs/day er: 2 hrs/day er: 4 Nostoexe a squatting, 1 legs elevated Repe ian Signature; TAYLOR, IN D.G.	Climbi Reaching Abo (L): Reaching Bel (L): Ecd Weight the Lifting(hrs) Please allow wo	we Shoulder we Shoulder we Shoulder Weigh ker to sit/stan Accommodat	Reaching Abov Reaching Below It Limit(ib): < or d to comfort. Prefor knee braice plenszky, Medic	shing: e Shoulder (R): v Shoulder (R): = to 10 pounds evide chair if es. al Director
Sitting: Squatting: Pulling: Carrying(hrs): Weight Comments: Seated work 75 needed. Allow breaks every Hands: i.e. Fine Manipulatio Feetaics: Operating Foot Son Driving / Operate Machinery Physician Name: Alan N Ta	<pre></pre>	ding: 2 hrs/day cing; 2 hrs/day er: 2 hrs/day er: 4 Nostoexe a squatting, 1 legs elevated Repe ian Signature; TAYLOR, IN D.G.	Climbi Reaching Abo (L): Reaching Bel (L): Ecd Weight the Lifting(hrs) Please allow wo	we Shoulder we Shoulder we Shoulder Weigh ker to sit/stan Accommodat	Reaching Abov Reaching Below Limit(ib): < or d to comfort. Prefor knee braice	shing: e Shoulder (R): v Shoulder (R): = to 10 pounds ovide chair if

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 5 of 39 CONFIDENTIAL

Printe Distribute Training To the State State Distribute Training	1.
ICheck-In Time: 12:32 Pm Visit Discharge Time: 13:00 PM	•
	· · · · · · · · · · · · · · · · · · ·
Circums Treating Physician on Chirographor Page 2-Insurer/FPA Page 3-Employer Page 4-Purplayer	

RENOWN006593 CONFIDENTIAL

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Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1668 Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

ate of Service: 8/11/2016	No Show			/Time of l	Next Visi	1. 8/25/201	6 @ 9:00 AM
		ClaimInfo					
atient Name: Lucero Sanchez		Claim Num			> ,		
mployer RENOWN			rv: 7/26/2016	 —————————			
nsurer / TPA: Workers Choice		ID/SSN:					
Occupation: Cashler			Diagnoses of Str ght knee, subse				
2.46.3.53.67.26.26.27.46.77.86.5		redical Inf	ormation : 💘				
telated to Industrial Injury? Yes							
Subjective Complaints: DOI 7/20	5/16. Tripped and fell	over cords	while closing th	e cash reg	ister. Fe	l on both k	nees on hard
looring. She states that her kne symptoms. She states that the k workplace is reduced her hours normal job.	nee braces help with p to the restrictions. Sh	ain with w c feels that	alking and she l she would like	ias been al e trial of fi	ole to we	ik with the to see if she	in better. The
Objective Findings: Right knee: aspect of knee. Full range of mo clicits pain, Pain with varus and Left knee: No gross deformity. with knee flexion. Anterior post	ition but pain with kn I valgus stress. Tender to palpation o	ee flexion n the laters	Anterior posteri I And posterio	ior drawer raspect of	signs ar knec. Fr	e negative.	McNiurray's
with varus and valgus stress. A	Mà to coust noin.	e neganie.	Memberay 5 et	icus pagi.	K Eiti		
with varus and valgus stress. A: Pre-Existing Condition(s):	ore to squar parity				· · ·	-	· · · · · · · · · · · · · · · · · · ·
Assessment: Condition Same							
Assessment. Condition Same Status: Additional Care Require	art.	Sarmonant	Disability:No			······································	
Piging: Waditiohat esta ucdan	zu.	Lennanchi	Tyrestime, 140				
Plan; PT		4					
Diagnostics:	<u> </u>				···		
Comments: We'll refer to PT for	er configuing symptom	ne Will oll	w ostient in at	famine tyla	i of full c	מללומי נילינו	onomina do tion
for knee braces. Follow up in 2	or community symptom of the remains of the same	itas et ils ei il	air barietir in ar	reinits sura	i di tan t	ruth mitte a	ccommonanda
			Maria ation		TO THE ANNUAL PROPERTY.	1980 CERTS AN	
Status: Released to Pull Duty	Large production of the section of t	V.13617111117777	The state of the s	AND SECURITY OF THE	are a ministration of	2.40% STRONG -	
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	erapiya metaloga	Physical R	estrictions.				QWHWW.ZvetCl.sc
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Squatting:	Walking:		Climbing:		······································	Push	ing:
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Feet i.e. Operating Foot Contro			· · · · · · · · · · · · · · · · · · ·		-		
Driving / Operate Machinety:	A 10 - 1					,	
Physician Name: Alan N Taylo	er Physician Si	kmature:	e-Signature: D	· Tiber T	- Incharite	. RAndine	Thinastad
e wy similar mainte worm in 1983;	e-SignTAY ALAN N D	LOR,	c-diZhaihte: 5)	r. FÍNSÞÍ BÍ	e _j otonszk	L' ilraines	DECECUT
Clinic Renown Occupatio	nal Health - Ryland			Clinic Pi	ione Nur	nber: It	Dept: 775-982-475
Name / 975 Ryland, Suite Location: Reno, NV 89502-16	102			Caratte E I			walker () muscand (2)
1		····					

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 7 of 39 CONFIDENTIAL

Appointment Time:	11:30 Am	Visit Start Time:	11:25 AM
Check-In Time:	11:17 Am	Visit Discharge Time:	12:04 PM
	V "		

Original-Treating Physician or Chiropractor Page 2-Insurer/TPA Page 3-Employer Page 4-Employee

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 8 of 39 CONFIDENTIAL

08/18/2016 17:48 Renown Demonte Urgent Care

(FAX)775 852 2360

P.002/003

Renown Urgent Care Damonte

197 Damonte Ranch Pkwy Unit A And B - Reno, NV 89521-2960 Phone: 775-982-5000 - Fax: 775-982-2926

Occupational H	ealth Network	Progre	ss Report an	<u>d Disal</u>	bility Certific	cation
Date of Service: 8/18/2016	No Shaw:	No	Date /		lext Visit: 8/25/20	
		laim inf				
Patient Name: Lucero Sauchez		lain Nur				
Employer: RENOWN ***	1	Date of In	ury: 7/26/2016			WEAR STREET, WITH THE PARTY OF
insurer / TPA: Workers Choice **		D/SSN:	Gestant.	Cyra (Marrison) by Law or 12 and 12 and 12		
Occupation: Cashier ***		Diagnosis	Diagnoses of Con	itesion of	righi knes, subse	quent encounter,
	19	Strain of	right knee, subseq	uent enco	unter. Contusion	of left knee.
	3	ubseque	it encounter, and	Strain of	left knee, subscar	sent ancounter
		vere part	inent to this visit.			
			fermation			W
Related to Industrial Injury? Yes **	T.					- The same of the
Subjective Complaints; DOI 7/26/ xrays. Seen in f/u in occupational little. At her last visi t she requested to go back to full regular duty but it is too paloful	health 8/4/15 and 8/1 regular duty because	1/16. Pro she wast	scribed diclofona 't getting her hou	e gel whic es and wa	h helps a little. K	nee broces help a
Objective Findings: Right knee wi	th swelling, fin medic	al and lat	eral loint line. Cler	ion and e	hearthey anisary	d/t nois and
stiffness. Left knee with minimal					remoted tedesign	· m· + 한다11 K11년
Pre-Existing Condition(s):	A to detertible 15017 sanseen	10 10 0 Z C C/ 1.	a stresson die boller			
Assessment: Condition Worsens	<u></u>					THE RESERVE THE PROPERTY OF THE PARTY OF THE
Status: Additional Care Required		Pennaner	t Disability:No			
handren varancorosca, com a stantas (a)	•	. C. (1154)15Tl	e resountify 140			
Plan: MedicationPT						
Comments: continue diciofense g	el, starting PT on Mc	ากต้อง				
Diagnostics;		C3479 VI J				
Comments:	The state of the s					and the state of t
The second second	T's	icalditive.	laformation			The state of the s
Status: Released to Restricted Di		Alitteres	CHIOLING COM	****************	*************************************	
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Through: 8/25/2016		teritary in the	ms a.e. remporar	ÿ		
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Carrying(hrs); Weight Litr	rit(lb):		Lifting(hrs):	Weiel	nt Limit(lb):	
Comments: Seated work 75% of	time. Minimize squa	tting. Pla	ase allow worker	to sit/stan	d to comfort. Pro	yide chair if
needed. Allow breaks every 2 h	purs to sit with legs e	evated fo	r 15 minutes. Acc	ommodai	ie for knee brace:	1.
	Tall I	Repetit	ve Actions		The state of the s	
Hands: i.e. Fine Manipulations fr	om Graspine:	· · · · · · · · · · · · · · · · · · ·				
Feet: i.e. Operating Foot Controls					7	The state of the s
Driving / Operate Machinery:						
Physician Nam≑: Hillary G Wils	on Physician SignWILS HILLARY (ON,	e-Signature: Dr.	Tiber Te	plensuky, Medics	il Director
Clinic Renown Urgent Care				Clinic Ph	one Number:	Dapt: 775-982-500
Name / 197 Damonte Ranch F]	- · · · · · · · · · · · · · · · · · · ·	1
Logation: Reno, NV 89521-2960						1
Appointment Time: 5:30 Pm		sii Staii T	Ine:		5:30 PM	The second of th
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Received on 8/18/2016 6:02:33 PM [Pacific Daylight Time]

08/19/2016

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08/15/2016 17:48 Renown Damonte Urgent Care

(FAX)775 852 2360

P.003/003

Check-In Time: 5:28 Pm

Visit Discharge Time:

444

Original-Treating Physician or Chiropractor Page 2-Insurer/TPA Page 3-Employee Page 4-Employee

Received on 8/18/2016 8:02:33 PM [Pacific Daylight Time] 08/19/2016

Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1668. Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

te of Service: 8/25/2016	No Show: No	Date / Time of	Next Visit: 9/15/2016 @ 8:49AM					
	Claim	Information						
tient Name: Lucero Sanchez	Chairn	Number:						
nployer: RENOWN	Date o	f Injury: 7/26/2016						
surer / TPA: Workers Choice	/ TPA; Workers Choice ID / SSN:							
odupation: Cashier			knee, subsequent encounter and					
			ounter were pertinent to this visit.					
k	Medic	l'information	经基础的 2000年的基础的					
elated to Industrial Injury? Yes								
rays. She had been released to rgent care restrictions were liaced. She states that she has f nee. Her right knee has not im	full duty 2 weeks ago, but w elt some improvement in he proved at all since last visit,	asn't able to tolerated and so ; er left knee but continues with , she states that she occasionali	rd on the ground. Had negative r few days later she was seen at: pain on the lateral aspect of the left y feels like it's come to the lateral aspect at from					
10 there is no one else at her s ere looking for another job for	tation and so she cannot fol her to do temporarily, but	low the work restrictions during the have yet to resolve and her. S	ng that time. She states they					
speet of knee. Full range of the licits pain. Pain wit verus and valgus stress. Left knee: No gross deformity, notion but pain with knee flexi	tion but pain with knee fler Minimally tender to palpat on, Anterior posterior drav	tion. Anterior posterior drawe ion on the lateral and posterio ver signs are negative. McMur.						
pain. Pain with yarus and val	ius stress. Able to squat wit	h pain.						
Pre-Existing Condition(s):								
Assessment: Condition Same								
Status: Additional Care Require	ed Perr	agent Disability:No						
Plan:								
Diagnostics:								
Comments: Continue PT Continue to use knee braces as Continue diclofenac gel Follow-up 3 weeks								
	Disab	ility Information						
Status: Released to Restricted I			4					
From: 8/25/2016 Through: 9/15/2016	Res	mictions ares Temporary						
	Phys	ical Restrictions						
Sitting:	Standing: < or = to 2 hrs/day	Stooping:	Banding:					
Squatting:	Walking: <or 2="" =="" day<="" hrs="" td="" to=""><td>Climbing:</td><td>Pushing:</td></or>	Climbing:	Pushing:					
Pulling:	Other:	Reaching Above Shoulder (L):	Reaching Above Shoulder (R):					
		Reaching Below Shoulder (L):	Reaching Below Shoulder (R):					
	Not to e	xceed Weight Limits						
Carrying(hrs): Weight L	imit(lb):	Lifting(hrs): Wei	ight Limit(lb):					
			he day. Allow to sit/stand to comfort.					
Accommodate for knee brace			•					

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 11 of 39 CONFIDENTIAL

	*********	Repetit	ive Actions		
Hands: i.e. Fine Manipulatio	ns from Graspi	ng:			
Feet: i.e. Operating Foot Cor	rtrols;	• • • • • • • • • • • • • • • • • • • •			· · · · · · · · · · · · · · · · · · ·
Driving / Operate Machinery)				
Physician Name: Alan N Ta	ē- Ā	rysician Signature: SignTAYLOR, LAN N D.O.	e-Signature: Dr	. Tibor Toplenszky, Med	ical Director
Clinic Renown Occupa Name / 975 Ryland, Suit Location: Reno, NV 89502-	te. 102.	Ryland.		Cimic Phone Number:	Depts 775-982-4754
Appointment Time: 9:00 A		Visit Start T		9:06 AM	56.000
Check-In Time: 9:03 A		Visit Discha		9:39 AM	

Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NY 89502-1668 Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

	No Show: No		lext Visit 10/4/2016 @ 9:00 AM
		niormation	
atient Name: Lucero Sanchez	Claim N		
mployer: RENOWN		โหล็งเหลา/คิดเวลาดี	
nsurer / TPA: Workers Choice	iD/	-	
Decupation: Cashier			knee, subsequent encounter and unter were perfigent to this visit.
		Information	
Related to Industrial Injury? Yes			
Subjective Complaints: DOI 7/26/16.	Tripped and fell over co	rds and fell on both knees har	d on the ground. Had nagative
krays. Patient states that she's been t	ble to attend to sessions	of physical therapy. She is no	ted significant improvement in her
est knee which he states is about 75%			
over the patella and the lateral aspec			
following restrictions and patient sta		ing frequently and standing m	iostly throughout the day. She
notes that she has for physical thera			
Objective Findings: Right knee: No g			
aspect of knee. Full range of motion	but pain with knee flexio	on. Anterior posterior drawer	signs are negative. McMurray's
elicits pain. Pain with varus and val	jus stress. Left knee: No	gross deformity. Minimally to	nder to palpation on the lateral
and posterior aspect of knee. Full ra	nge of motion but pain v	vith knee flexion. Anterior pos	storior diswer signs are negative.
McMurray's elicits pain. Pain with	arus and valgus stress.	Able to squat with pain.	
Pre-Existing Condition(s):			
Assessment: Condition Same		<u> </u>	
Status: Additional Care Required	Permar	nent Disability:No	
Plan:			
Diagnostics:			
Comments: Confinue physical there	ру -		. }
OTC Tylenol as needed			,
Continue to use knee brace as ucede	ed		<u>}</u>
Follow-up 3 weeks	en a como monte en estado en en estado en en entre en en		
	Disabili	ty Information	
Status: Released to Restricted Duty			A TO STANDARD CONTRACTOR OF THE ACT AND A TOTAL CONTRACTOR OF THE PROPERTY OF
			7.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
From: 9/13/2016	Restric	ctions are: Temporary	7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
From: 9/13/2016 Through; 10/4/2016			7
Through; 10/4/2016	 	al Restrictions	
	 Standing:		Rending:
Through; 10/4/2016 Sitting:	Standing: <pre><pre><pre><pre><pre><pre><pre><pre></pre></pre></pre></pre></pre></pre></pre></pre>	at Restrictions Stooping:	
Through; 10/4/2016 Sitting: Squatting:	 Standing:	at Restrictions Stooping: Climbing:	Pushings
Through; 10/4/2016 Sitting:	Zhysic Standing: < or = to 2 hrs/day Walking:	Stooping: Climbing: Reaching Above Shoulder	
Through; 10/4/2016 Sitting: Squatting:	Standing: Standing: Sor = to 2 hrs/day Walking: < or = to 2 hrs/day	Stooping: Climbing: Reaching Above Shoulder (L.): Reaching Below Shoulder	Pushings
Through; 10/4/2016 Sitting: Squatting:	Standing: Standing: <or 2="" <or="to" =="" day="" hrs="" other:<="" td="" to="" walking:=""><td>Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L):</td><td>Pushing: Reaching Above Shoulder (R):</td></or>	Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L):	Pushing: Reaching Above Shoulder (R):
Through; 10/4/2016 Sitting: Squatting: Pulling:	Enysic Standing: <or 2="" <or="to" =="" day="" hrs="" other:<="" td="" to="" walking:=""><td>Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L):</td><td>Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R):</td></or>	Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L):	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R):
Through; 10/4/2016 Sitting: Squatting: Pulling: Carrying(hrs): Weight Limit(Standing: Standing: Standing: Sor = to 2 hrs/day Walking: Sor = to 2 hrs/day Other: Not to exc	Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): eed Weight Limits: Lifting(his): Weigh	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):
Sitting: Squatting: Pulling: Carrying(hrs): Weight Limit(Standing: Standing: Standing: Sor = to 2 hrs/day Walking: Sor = to 2 hrs/day Other: Not to exc	Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): eed Weight Limits: Lifting(his): Weigh	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R):
Through; 10/4/2016 Sitting: Squatting: Pulling: Carrying(hrs): Weight Limit(Standing: Standing: Standing: Sor = to 2 hrs/day Walking: Sor = to 2 hrs/day Other: Notioesc b): ne. Allowed to clevete-leg	Steeping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): Reaching Below Shoulder (L): End Weight Limits: Lifting(his): Weight Steep Shoulder (L): Seed Weight Limits: Seed W	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):
Sitting: Squatting: Squatting: Pulling: Carrying(hrs): Weight Limit(Comments: Seated-work 75% of the Accommodate for knee braces.	Standing: Standi	Stooping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): eed Weight Limits: Lifting(his): Weigh	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):
Sitting: Squatting: Squatting: Pulling: Carrying(hrs): Weight Limit() Comments: Seated work 75% of the Accommodate for knee braces. Hands: i.e. Fine Manipulations from	Standing: Standi	Steeping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): Reaching Below Shoulder (L): End Weight Limits: Lifting(his): Weight Steep Shoulder (L): Seed Weight Limits: Seed W	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):
Sitting: Squatting: Squatting: Pulling: Carrying(hrs): Weight Limit(Comments: Seated-work 75% of the Accommodate for knee braces. Hands: i.e. Fine Manipulations from Feet: i.e. Operating Foot Controls:	Standing: Standi	Steeping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): Reaching Below Shoulder (L): End Weight Limits: Lifting(his): Weight Steep Shoulder (L): Seed Weight Limits: Seed W	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):
Sitting: Squatting: Squatting: Pulling: Carrying(hrs): Weight Limit() Comments: Seated work 75% of the Accommodate for knee braces. Hands: i.e. Fine Manipulations from	Standing: Standi	Steeping: Climbing: Reaching Above Shoulder (L): Reaching Below Shoulder (L): eed Weight Limits Lifting(hrs): Weight Stouth out the	Pushing: Reaching Above Shoulder (R): Reaching Below Shoulder (R): It Limit(lb):

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CONFIDENTIAL

Linic Renown C	ccupational Health - Ryland	1	Clinic Phone Number:	Dept: 775-982-4754
	I. Suite 102			1
Location: Reno, NV	89502-1668	a to the second	<u> </u>	
Appointment Time:	8:40 Am	Visit Start Time;	8:53 AM	
Check-in Time:	8:47 Am	Visit Discharge Time;	9:17 AM	

Original-Treating Physician or Chiropractor Page 2-Insurer/TPA Fage 3-Employer Page 4-Employee

Renovn.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1668 Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification Date of Service: 10/4/2016 Date / Time of Next Visit: 10/25/2016 @ 9am No Show: No Claim Information. Patient Name: Lucero Sanchez Claim Number: Employer: RENOWN Date of Injury; 7/26/2016 Insurer / TPA: Workers Choice IDIOccupation: Cashler Diagnosis: Diagnoses of Strain of left knee, subsequent encounter and Strain of right knee, subsequent encounter were pertinent to this visit. Medical Information Related to Industrial Injury? Yes Subjective Complaints: DOI 7/26/16. Tripped and fell over cords and fell on both knees hard on the ground. Had negative Kravs. Patient states her left knee initially improved but is worse in the last couple days especially at night. Her right knee has not shown much im provement. She continues to have pain with walking up and down steps, walking throughout the day. Occasionally feel likethe kidneys. She's completed 6 out of 6 physical therapy visits with minimal improvement in the right knee and moderate împroveme nt in the left knee. Objective Findings: Right knee: No gross deformity minimal swelling ou the lateral aspect. Tender to palpation on the lateral aspect of knee. Full range of motion but pain with knee flexion. Anterior posterior drawer signs are negative. McMurray's positive. Pain with va rus and valgus stress. Left knee: No gross deformity, Minimally tender to paipation on the lateral and posterior aspect of knee. Full range of motion but pain with knee flexion. Anterior posterior drawer signs are negative. McMarray's elicits pa in. Minimal Pain with varus and valgus stress. Able to squat with pain. Pre-Existing Condition(s): Assessment: Condition Same Status: Additional Care Required Permanent Disability:No Plan: Diagnostics: Comments: Given lack of improvement in right knee will order MRI We'll order more physical therapy for both knees. Continue OTC NSAIDs as needed Follow-up 3 weeks Disabine information Status: Released to Restricted Duty From: 10/4/2016 Restrictions are: Temporary Through: 10/25/2016 Madakt Physical Restrictions Sitting: Standing: Stooping: Bending: < or = to 4 hrs/day Walking: Climbing: Squatting: Pushing: < or = to 4 hrs/day Pulling: Otner: Reaching Above Shoulder Reaching Above Shoulder (R): (L): Reaching Below Shoulder Reaching Below Shoulder (R): (L): Not to exceed Weight Limits Carrying(hrs): Weight Limit(lb): Weight Limit(lb): Lifting(hrs); Comments: Scated work 50% of time. Allowed to elevate legs periodically throughout the day. Allow to sit/stand to comfort. Accommodate for knee braces. Repetitive Actions

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 15 of 39 CONFIDENTIAL

Hands: i.e	. Fine Mani	pulations from G			· · · · · · · · · · · · · · · · · · ·	- 1-1-1-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	
Feet, i.e. (Operating Fo	oot:Controls:		entra a 1			
Driving /	Operate Mad	chinery:					
Physician	Name: Alai	n N Taylor	Physician Signature: e-SignTAYLOR, ALAN N D.O.	e-Signature; Dr	. Tibor Topl	enszky, Mędi	cal Director
Clinic	Renown O	ccupational Hea	lth - Ryland		Clinic Phon	e Number:	Dept: 775-982-4754
Name /	975 Ryland	l, Suite 102	•				
Location:	Reno, NV	89502-1668			.]		
Appointm	ent Time:	9:00 Am	Visit Start Tu	ńę:		8:51 AM	
Check-In	Time:	8:47 Am	Visit Dischar	ge Time:		9:15am	

Original-Treating Physician or Chiropractor Page 2-Insurer/CPA Page 3-Employer Page 4-Employee

Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1668 Phorie: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

Date of Service: 10/25/2016	No Show: No	Date / Time of	Next Visit: 11/15/2016 @ 9am			
AND THE PROPERTY OF STREET		ilormation				
Patient Name: Lucero Sanchez	Claim N		C. S.			
Employer: RENOWN	Date of	Date of injury: 7/26/2016				
insurer / TPA: Workers Choice	ID/SS					
Occupation: Cashier	Strain	sis: Diagnoses of Strain of left of right kniee, subsequent enco aspecified osteoarthritis type	knee, subsequent encounter, ounter, and Osteparthritis of rig were pertinent to this visit.			
		Information				
Related to Industrial Injury?			Company of the Compan			
Comments:MRI moderate to sev	ere osteoarthritis of right ke	iee, likely similar findings on	feft knes			
Subjective Complaints: DOI 7/26/ xrays.	/16. Tripped and feil over co	rds and fell on both knees ha	rd on the ground. Had negative			
Patient states that he has not the difficulty squatting		·	nt knee. She states that she has			
because of pain. She states that	they approved another 10 vi	sits for physical therapy.				
Objective Findings: Right knee: It aspect of knee. Full range of mospositive. Pain with va	tion but pain with knee flexion	swetting on the interal aspect. on. Anterior posterior drawer	Tender to palpation on the later r'signs are negative. McMurray':			
rus and valgus stress.						
Left knee; No gross deformity. It pain with knee flexion. Anterior inimal Pain with varus and valg	posterior drawer signs are i	negative. McMurray's elicits	ect of knee. Full range of motion pain. M			
Pre-Existing Condition(s):	es scress. Onsole to letty squ	iat tine to bain				
Assessment: Condition Same						
Status: Additional Care Require	4	and Disc. Since				
Status. Additional Care Require	a rema	nent Disability:No				
Plan:						
Diagnostics:	· · · · · · · · · · · · · · · · · · ·					
Comments: Continue physical t	hazanı					
Referral to Ortho for bilateral i						
OTC Ibuprofen as needed	ritee infertions					
Restricted duty			· .			
Follow up three weeks	•		•			
TOROW UP IN EC ACEAS		iy Information	41.8 (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4			
Status: Released to Restricted D		A COLUMN TO THE PROPERTY OF THE PARTY OF THE	<u>iang ng Papaga ng Papagan ng Papaga</u>			
From: 10/25/2016		ctions are: Temporary	-			
Through: 13/15/2016	restri	orons asce remporary				
THE CONTRACT OF STREET STREET	The state of the s	al Restrictions				
Sitting:	Standing:	Stooping:				
Dictions.	<pre>< or = to 4 hrs/day</pre>	១ពេកពិរដន្តិ;	Bending:			
Squatting:	Walking:	Climbing:	Pushing:			
	<pre>valking. <or=to day<="" hrs="" pre="" v=""></or=to></pre>	cuitinitis.	rusning!			
Pulling:	Other:	Reaching Above Shoulder	Reaching Above Shoulder (R):			
r uning.	Gater.	(L):	vesching woone guonide; (K):			
		Reaching Below Shoulder (L):	Reaching Below Shoulder (R):			
100000000000000000000000000000000000000		need Weight Limits				
Carrying(hrs): Weight Li		Lifting(hrs): Wei	ght Limit(lb):			
Comments: Seated work 50% of	of time. Allowed to elevate le	gs periodically throughout th	e day. Allow to sit/stand to comf			
	Rep	etitive Actions				
Hands: i.e. Fine Manipulations (

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 17 of 39 CONFIDENTIAL

Feet: i.e. (Operating Foot Cor	urols:					
Driving /	Operate Machinery	/ <u>`</u>					
Physician Name: Alan N Taylor Physician Signature: e-Signature: Dr. Tibor Toplenszky, Medical Director e-SignTAYLOR, ALAN N D.O.					cal Director		
Name /	Renown Occupate 975 Ryland, Suit Reno, NV 89502-		d		Clinic Phone	: Number:	Dept: 775-982-4754
Appointm	ent Time: 9:00 A	m	Visit Start Tir	ne:	~J.~	8:51 AM	
Check-In	Time: 8:46 A	m	Visit Discharg	ge Time:		9:30am	

Original-Treating Physician or Chiropractor Page 2-Insurer/TPA Page 3-Employer Page 4-Employee

Renown.

Renown Occupational Health - Ryland

975 Ryland, Suite 102 - Reno, NV 89502-1668 Phone: 775-982-4754 - Fax: 775-982-4704

Occupational Health Network Progress Report and Disability Certification

Date of Service: 11/18/2016	No Show: No	Date / Time of	Next Visit: 12/2/2016 @ 9:00 AM
		information 7	THE PROPERTY OF THE PARTY OF TH
Patient Name: Lucero Sanchez		Number:	The second state of the second
Employer: RENOWN		of Intury: 7/26/2016	
Insurer / TPA: Workers Choice	ID/S		
Occupation: Cashier	Diagn Strair	osis: Diagnoses of Strain of let	ft knee, subsequent encounter, counter, and Osteoarthritis of right
	Media	allinicaniation.	e were pertinent to this visit
Related to Industrial Injury?		THEORITACION SERVICE OF SERVICE SERVIC	z respective com a managent en este en establica en la filla en en filma.
Comments:MRI moderate to sever	a osteoarthritis of right i	tuee likely similar findings or	laft lenge
Subjective Complaints: DOI 7/26/16 grays, MRI of right knee showed of She states that her right knee conti have been helping much lately. Sho	 Tripped and fell over onederate to severe osiecal inues to be somewhat wo does have an appointment 	ords and fell on both knees he ethrics. Patient states that he rse than left. She states that sl ent with the orthopedic specia	ard on the ground. Had negative r knee pain has been about the same. se has for physical therapy visits left
and anterior aspect of knee. Full re	ange of motion but pain	with knee flexion. Anterior no	sterior drawer sions are negative
Pain with varus and valgus stress.	Left knee: No gross defo	rmity. Diffuse tenderness ave	r lateral and posterior aspects of
knee. Full range of motion but pair	e with knee flexion. Ante	rior posterior drawer signs a	re negative. McNurray's elicits pain.
Minimal Pain with varus and valge	us stress. Unable to fully	squat due to pain	
Pre-Existing Condition(s):			
Assessment: Condition Same			
Status: Additional Care Required	Perm	anent Disability:No	
Plan:			
Diagnostics:			:
Comments: Keep appointment wit	h orthopedics		
Continue Tylenol OTC as needed			
Continue physical therapy			
Continue restricted duty		•	
Follow-up 2 weeks			
	There	Rev Information	
Status: Released to Restricted Dut		TO PARTICIPATION OF THE PARTIC	<u> Na aliante de la companiona del companiona dela compani</u>
From: 11/18/2016		rictions are: Temporary	
Through: 12/2/2916	10531	ribitions are. Temporary	
	Physi	cal Restrictions	
Sitting:	Standing:	Stooping:	Bending;
		j alaujans.	55
Squatting:	Walking:	Climbing:	Pushing:
Pulling:	Other:	Reaching Above Shoulder (L):	Reaching Above Shoulder (R);
		Reaching Below Shoulder (L):	Reaching Below Shoulder (R):
	Not to e	ceen Weight Limits	
Carrying(hrs): Weight Limit			ght Limit(lb):
Comments: Seated work 50% of t			
		etitive Actions	
Hands: i.e. Fine Manipulations from		The second secon	A COLOR DE LA CARLA DE MARIE DE MARIE DE LA COMPANSA DE LA COLOR D
Feet: i.e. Operating Foot Controls:	· · · · · · · · · · · · · · · · · · ·		
Driving / Operate Machinery:	· · · · · · · · · · · · · · · · · · ·		
Physician Name: Alan N Taylor	Physician Signatur e-SignTAYLOR, ALAN N D.O.	e-Signature: Dr. Tibor 7	Topienszky, Medical Director

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 19 of 39 CONFIDENTIAL

Clinic R	Renown O	ccupational Health - R	yland	Clinic Phone Number:	Dept: 775-982-4754
Name / 9	975 Ryland, Suite 102				1
Location: R	teno, NV	39502-1668			
Appointmen	nt Time:	2:30 Pm	Visit Start Time:	2:25 PM	
Check-In Ti	ime:	2:10 Pm	Visit Discharge Time:	3:10 PM	

Original-Treating Physician or Chiropractor Page 2-Insurer/TPA Page 3-Employer Page 4-Employee

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 20 of 39

CONFIDENTIAL

43 Alan N. Taylor, DO

ORTHOPEDIC SURGICAL ASSOCIATES 85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993 55. Sobiek, M.D. Donald S. Huene, M.D.

E-724

Patient Name: Lucero Sanchez DOI: 7/26/2016 Surgery On:

Claim #13684 -WC Complaint: NP/ R knee

SUBJECTIVE FINDINGS: Rt Knee pain-She turned and tripped on Caldes, both Knees impacted the floor-Right Knee Po Swallen - lateral pain-pain behind her KneeD.T. Mas not helped-

recommendations:

Patient Released to Full Duty without Restrictions on (dat	e) 11 2 8 1 0
Patient certified Temporarily Disabled From	to
Released to Restricted/Light/Modified Duty on (date)	
Permanent and Stationary Yes	
Stable Yes(No) R	tateable Yes (C_)
No repetitive use of:	*
No SittingNo StandingNo Pulli	ngNo Carrying
No StoopingNo LiftingNo Pust	ningNo Walking
No ClimblingNo Reaching Above Shoulders	No Bending at the Waist
No Repetitive Gripping or GraspingNo Use	L/R Upper Extremity
Brace OnSedent	ary Only/Sit Down Only
Lifting Restricted to (lbs) Other:	Wed Dec. 22
Next Appointment /	9:45Am
Physician's Signature	Date11/25/2016 09:30 AW

XIC

ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

ent Name: Lucero Sanchez Claim #13684 -WC 1: 7/26/2016 Complaint: reck- R knee Surgery On: SUBJECTIVE FINDINGS: Rt Knee reck- post depo celestone -the same-still very swollen-still hurts-**OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date) Patient certified Temporarily Disabled From Released to Restricted/Light/Modified Duty on (date) Permanent and Stationary Νo Yes_ Rateable Yes _No repetitive use of: _ _No Sitting __No Standing No Pulling _No Carrying __No Stooping _No Lifting _No Pushing _No Walking _No Climbing No Reaching Above Shoulders No Bending at the Waist _No Repetitive Gripping or Grasping __No Use L/R Upper Extremity Brace On _Sedentary Only/Sit Down Only Lifting Restricted to (lbs) Other: Next Appointment Physician's Signature

Case 3:21-cv-00352-MMD-CSD Document 43-7 Filed 10/19/22 Page 22 of 39

ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez : 7/26/2016	Claim #13684					
Surgery On: 1/13/2017	Complaint <u>:</u>	Right Knees	Pre op	W/C		
SUBJECTIVE FINDINGS;						
OBJECTIVE FINDINGS:						
RECOMMENDATIONS:						
ALCOHALIDATIONS.						
				S		
Patient Released to Full Duty without Restrict	tions on (date)		·	•		
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Next Appointment

Physician's Signature

Other:

ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

ient Name: Lucero Sanchez Claim #13684 -WC -JI: 7/26/2016 Complaint: postop- R knee Surgery On: 1/13/2017 post op she is having a lot of SUBJECTIVE FINDINGS: 5 DOIN. **OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date) _Patient certified Temporarily Disabled From_ Released to Restricted/Light/Modified Duty on (date) Permanent and Stationary _No Stable Yes Rateable Yes _No repetitive use of: _ _No Sitting _No Standing _No Pulling _No Carrying _No Stooping _No Lifting _No Pushing __No Walking _No Climbing _No Reaching Above Shoulders ____No Bending at the Waist _No Repetitive Gripping or Grasping _No Use L/R Upper Extremity Brace On Sedentary Only/Sit Down Only

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ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

tient Name: Lucero Sanchez Claim #13684 -WC JI: 7/26/2016 Complaint: reck- R Knee Surgery On: 1-13-17 subjective findings: 24 days post op - is a little better - Still has swelling - pain when walking - feels weak-**OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date) Patient certified Temporarily Disabled From_ _Released to Restricted/Light/Modified Duty on (date) Permanent and Stationary Yes No Stable Rateable Yes _No repetitive use of: _No Sitting _No Standing _No Pulling _No Carrying _No Stooping _No Lifting _No Pushing _No Walking _No Climbing No Reaching Above Shoulders _No Bending at the Waist _No Repetitive Gripping or Grasping _No Use L/R Upper Extremity _Brace On Sedentary Only/Sit Down Only Lifting Restricted to (lbs) Other: Next Appointment Physician's Signature Date .2/6/2017 09:30 AM

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James S. Sobiek, M.D.

Physician's Signature

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez Claim #13684 WC I: 7/26/2016 Complaint: reck- R knee-Surgery On: 1/13/2017 SUBJECTIVE FINDINGS: \mathbb{R}^+ **OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date) _Patient certified Temporarily Disabled From_ _Released to Restricted/Light/Modified Duty on (date) Permanent and Stationary Yes No Stable Rateable Yes _No repetitive use of: __No Sitting __No Standing __No Pulling ____No Carrying __No Stooping __No Lifting __No Pushing ___No Walking ___No Climbing ___No Réaching Above Shoulders ____No Bending at the Waist ___No Repetitive Gripping or Grasping __No Use L/R Upper Extremity _Brace On ___Sedentary Only/Sit Down Only Lifting Restricted to (Ibs) Other: Next Appointment_

2/22/2017 09:00 AM

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		JRGICAL ASSOCIATES 2 #303 Rano NV 89502-1344	
_	(775) 329-8423	/Fax (775) 329-7993	
Zi	mes S. Sobiek, M.D.	Donald S. Huene, M.C).
Patient Name: Lucero Sa DOI: 7/26/2016	nchez	Claim #13684 -WC	
Surgery On: 1/13/2017		Complaint: rack- R knee	
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IOPEDIC SURGICAL ASSOCIATES \mathbf{O}'

85 Kirman Avenue, Suite #303 Reno NV 89502-1. . + (775) 329-8423 /Fax (775) 329-7993

Donald S. Huene, M.D.

James S. Sobiek, M.D. Patient Name: Lucero Sanchez Claim #13684 -WC Complaint: reck- R knee DOI: 7/26/2016 Surgery On: 1/13/2017 DOB: Knee reck see P.T. note-slowly SUBJECTIVE FINDINGS: 2+ better **OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date) _Patient certified Temporarily Disabled From_ Released to Restricted/Light/Modified Duty on (date) No Permanent and Stationary Yes Rateable Yes Stable Yes No repetitive use of: No Pulling No Carrying No Sitting · _No Standing No Pushing _No Walking _No Stooping _No Lifting _No Reaching Above Shoulders _No Bending at the Walst No Climbing _No Repetitive Gripping or Grasping No Use L/R Upper Extremity Sedentary Only/Sit Down Only _Brace On Lifting Restricted to (lbs) Other: Next Appointment_ 3/9/2017 08:45 AM Physician's Signature

ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez Claim #13684 -WC 7/26/2016 Complaint: reck- R knee Surgery On: 1/13/2017 DOB: SUBJECTIVE FINDINGS: Rt Knee reck-See P.T. note 3/29 - Rom is better, scime. **OBJECTIVE FINDINGS:** RECOMMENDATIONS: Patient Released to Full Duty without Restrictions on (date)_ Patient certified Temporarily Disabled From_ _Released to Restricted/Light/Modified Duty on (date)__ Permanent and Stationary Rateable Yes No repetitive use of: No-Śitting No Standing _No Pulling ___No Carrying No Stooping _No Lifting ___No Walking ____No Pushing _No Climbing No Reaching Above Shoulders ____No Bending at the Waist _No Repetitive Gripping or Grasping No Use L/R Upper Extremity _Brace On Sedentary Only/Sit Down Only Lifting Restricted to (lbs)_ Other: MO. Next Appointment_ Physician's Signature Date _4/6/2017 10:15 AM

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ORTHOPEDIC SURGICAL ASSOCIATES 85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez DOI: 7/26/2016 [.] Surgery On: 1/13/17 DOB:	Claim #13684 Complaint: Rt Knee w/c recheck
subjective findings: Rt Knee reck improvement - Still swollen worse last week - gives o	- Called for P.T. note-no 1- pain about the same-dial gct ut-
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ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993

<u> James S. Sobjek, M.D.</u>

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez DOI: 7/26/2016 Surgery On: DOB:	Claim #13684 Complaint: <u>Rt Knee GelOne W/C</u>
subjective findings: Gel one inj-	CAT. No. 00-1111-001-00 EDI: 00111100100 g Gel-One® Cross-linked Hyaluronate
OBJECTIVE FINDINGS:	Szimmer POL 0016H13G
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ORTHOPEDIC SURGICAL ASSOCIATES

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James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez DOI: 7/26/2016 Surgerv On:	Claim #13684 -WC Complaint: reck- R knee	
DOB:	Ael one in . Still has swelling	
SUBJECTIVE FINDINGS: 1 MH F	post Gel one inj. Still has swelling -	
activity bothers he		
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Physician's Signature	Date7/5/2017 02:15 PM	

PATIENT NAME: Lucero Sanchez

DATE: August 16, 2017

She is here for an evaluation of her left knee. Of note, she fell directly on both knees during her industrial injury on July 26, 2016. She has gone through an injection, followed by a lateral release for her right knee and still has problem with prolonged standing and walking with the left knee, mostly I think due to retropatellar chondromalacia. Her left knee is not nearly as bad. She has not had swelling. She mostly has crepitus and pain beneath her kneecap, which started at the time of this injury as well.

PHYSICAL EXAMINATION: On exam today, she has 1 to 2+ retropatellar crepitus and lateral patellofemoral facet tenderness. She has no medial or lateral joint line tenderness. She has no varus, valgus or AP instability. She has no calf tenderness or pretibial swelling.

X-RAYS: Five-view x-rays taken in the office today show very mild spurring off the lateral patellofemoral joint and mild spurring about the medial compartment. There is good bone stock. The patella looks like it is tracking well.

IMPRESSION: Retropatellar chondromalacia, almost a year status post injury, which is mild to moderately limiting to her.

RECOMMENDATIONS: I think an excellent option at this point, as she has done therapy for both knees in the past, would be for viscosupplementation. We will put in for this. We will keep her on full duty work regarding her left knee and see her back for her injection.

James S. Sobiek, M.D. scs60

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James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez		Cla	im #13684			
DOI: 7/26/2016 Surgery On: DOB:		Cor	nplaint:	<u>Lt knee</u>	NI_	W/C_
CD .						
SUBJECTIVE FINDINGS: Left kne	e - She turn	ed and tripped	on cables,	both kne	es impacte	d on the floor, \mathcal{D}
beneath her knee	Cap -	rnootly	has	pain	- Ø SI	welling-
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DATE OF SERVICE: September 6, 2017

PATIENT NAME: Lucero Sanchez

CHIEF COMPLAINT: She is back for a Monovisc injection of the left knee.

HISTORY OF PRESENT ILLNESS: Again, she has had bilateral knee problems after a fall at work quite a while ago. She is still complaining of right knee pain where she had grade 4 changes, retropatellar, as well as chondral changes of her medial femoral condyle.

MEDICATIONS: Same as previous, reviewed and signed.

ALLERGIES: Same as previous, reviewed and signed.

EXAMINATION: On exam today, she has mostly patellofemoral facet tenderness.

IMPRESSION: Retropatellar chondromalacia, left knee.

PLAN/PROCEDURES: I have sterilely injected her left knee today with 1 amp of Monovisc and 1 cc of Celestone. She was observed in the office and was stable. She tolerated the procedure well and we will see her back in a month. We will keep her on full duty work.

She also has numerous complaints about bilateral ankle pain and states this is under her work claim though I think she would need to return to her occupational primary care doctor to have this worked up prior to being sent here, if she has any surgical indications, or she can be seen by podiatry or a foot and ankle specialist, such as Dr. Lundeen.

James S. Sobiek, M.D. scs60

Lifting Restricted to (lbs)

Next Appointment

Physician's Signature

Other:

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James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez Claim #13684 WC Complaint: Left Knee **DOI:** 7/26/2016 Surgery On: DOB: subjective findings: Monovisc inj - has ankle pain-**OBJECTIVE FINDINGS: RECOMMENDATIONS:** Patient Released to Full Duty without Restrictions on (date) Patient certified Temporarily Disabled From_ Released to Restricted/Light/Modified Duty on (date)_ No Permanent and Stationary Yes Stable Yes Rateable Yes ___No repetitive use of: _No Sitting No Standing No Pulling ____No Carrying No Stooping ____No Lifting No Pushing ___No Walking _No Climbing ___No Reaching Above Shoulders ____No Bending at the Waist No Repetitive Gripping or Grasping _____No Use L/R Upper Extremity Brace On __Sedentary Only/Sit Down Only

_____9/6/2017 11:00 AM

DATE OF SERVICE: October 4, 2017

PATIENT NAME: Lucero Sanchez

CHIEF COMPLAINT: Left knee follow up.

HISTORY OF PRESENT ILLNESS: She is seen back after a Monovisc injection of her left

knee. She did have improvement.

MEDICATIONS: Same as previous, reviewed and signed.

ALLERGIES: Same as previous, reviewed and signed.

EXAMINATION: On exam, there are no signs of DVT distally. She has a trace amount of

swelling today.

IMPRESSION: Retropatellar chondromalacia, left knee.

PLAN/PROCEDURES: She is not symptomatic enough that I would recommend any kind of MRI as I do not think she would be symptomatic to the point she would need surgical intervention and she agrees. She is getting close to the point of claim closure though I would like to give it one more month with light duty and then, hopefully, try to get her back to full duty work or she may need permanent restrictions. We will keep her on this light duty and see her back in one month. She is also working on trying to get her ankles open for an evaluation by a foot and ankle specialist and I have discussed this with her as well though I am not currently treating her ankles.

James S. Sobiek, M.D. scs09

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James S. Sobiek, M.D.

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez DOI: 7/26/2016	Claim #13684 WORKERS CHOICE Complaint: Left Knee				
Surgery On: DOB: SUBJECTIVE FINDINGS: Lt Knee reck- Pa	ost monovise inj. 9/6/11 - Injection				
helped for Zwks-pain-pops- Dwork-Swells onjoff-ma OBJECTIVE FINDINGS:	(*celestone) out monovise inj. 9/6/11 - Injection ankles swell-walks/stands all inly etne end of shift.				
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Physician's Signature	Date10/4/2017 11:00 AM				

DATE OF SERVICE: November 9, 2017

PATIENT NAME: Lucero Sanchez

CHIEF COMPLAINT: She is back for a recheck of her left knee patellofemoral syndrome status post viscosupplementation.

HISTORY OF PRESENT ILLNESS: She is better though only because she has not been working where she has to lift and constantly be on her feet.

MEDICATIONS: Same as previous, reviewed and signed.

ALLERGIES: Same as previous, reviewed and signed,

EXAMINATION: On exam today, there is no sign of DVT.

IMPRESSION: Left knee patellofemoral syndrome.

PLAN/PROCEDURES: I think, based on both knees, that she would be best off with permanent restrictions and I have written her for this. She is permanent and stationary, stable and ratable for both knees and her permanent restrictions will be no stooping, no climbing, sedentary position 75% of the time, and lifting restricted to 20 pounds. No follow up is needed.

James S. Sobiek, M.D. scs09

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ORTHOPEDIC SURGICAL ASSOCIATES

85 Kirman Avenue, Suite #303 Reno NV 89502-1344 (775) 329-8423 /Fax (775) 329-7993 James S. Sobiek, M.D. Donald S. Huend

Donald S. Huene, M.D.

Patient Name: Lucero Sanchez DOI: 7/26/2016 Surgery On:	Claim #13684 Complaint: <u>Lt Knee W/C reck</u>
subjective findings: Lt Knee reck- Is a not been working -	little better, but she has
OBJECTIVE FINDINGS:	
RECOMMENDATIONS:	
Patient Released to Full Duty without Restrictions on (date)	
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